

## 1 / 79

FF1AN060.PDF

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 79**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**MIKE GRAVEL FOR PRESIDENT 2008**

Report Covering the Period

From: 01/01/2007

To: 03/31/2007

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	11118.01	34670.07
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	50.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		11118.01	34720.07
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	4415.73	73515.73
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	4415.73	73515.73
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	0.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	15533.74	108235.80
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	18304.47	107737.46
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	18304.47	107737.46
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

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**1. NAME OF COMMITTEE (in full)****MIKE GRAVEL FOR PRESIDENT 2008****ADDRESS (number and street)**

1600 N OAK ST #1412

**CITY, STATE, and ZIP CODE**

ARLINGTON

VA

22209

**2. IDENTIFICATION NUMBER**

C00423202

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	8545.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>8545.00</b>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MARY ALLEN

Mailing Address

PO Box 66112

City

HOUSTON

State

TX

Zip Code

77266

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 9 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5106

B.

Full Name (Last, First, Middle Initial)

VALERIE ANTON

Mailing Address

80 ROSS AVENUE

City

SAN ANSELMO

State

CA

Zip Code

94960

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

2000.00

DONATION

Transaction ID: SA17A.5007

C.

Full Name (Last, First, Middle Initial)

JOYCE ARURI

Mailing Address

97 LEXINGTON AVE

City

NORTH DARTMOUTH

State

MA

Zip Code

02747

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.4908

SUBTOTAL of Receipts This Page (optional) .....

2075.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

RICHARD BAK

Mailing Address

1847 S CANALPORT AVE, 2ND FLOOR

City

CHICAGO

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

Name of Employer  
Chicago Biodiesel

Occupation  
STUDENT

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATIONS

Transaction ID: SA17A.5034

B.

Full Name (Last, First, Middle Initial)

CHRISTOPHER BASHAR

Mailing Address

510 GLENWOOL AVE, APT #405

City

RALEIGH

State

NC

Zip Code

27603

FEC ID number of contributing  
federal political committee.

Name of Employer  
GRAFTEC INTERNATIONAL

Occupation  
ACCOUNT MANAGER

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Transaction ID: SA17A.4914

C.

Full Name (Last, First, Middle Initial)

RYAN BASKING

Mailing Address

22451 CLOUT TRL

City

KIRKSVILLE

State

MT

Zip Code

63501

FEC ID number of contributing  
federal political committee.

Name of Employer  
TRUMAN STATE UNIVERSITY

Occupation  
STUDENT

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

40.00

DONATIONS

Transaction ID: SA17A.5171

SUBTOTAL of Receipts This Page (optional) .....

70.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ANNA BECK

Mailing Address

8545 Carmel Valley Rd

City

CARMEL

State

CA

Zip Code

93923

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation

ANTIQUES DEALER

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

MM / DD / YYYY  
01 / 10 / 2007

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.5072

B.

Full Name (Last, First, Middle Initial)

VID BELDAVS

Mailing Address

2451 E. 10th Street, Apt. 606

City

BLOOMINGTON

State

IN

Zip Code

47408

FEC ID number of contributing  
federal political committee.

Name of Employer  
AutoHouse

Occupation

Publishing Consultant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

MM / DD / YYYY  
02 / 11 / 2007

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5097

C.

Full Name (Last, First, Middle Initial)

ANDREW BELL

Mailing Address

2104 DALE STREET

City

SAN DIEGO

State

CA

Zip Code

92104

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNEMPLOYED

Occupation

UNEMPLOYED

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2007

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.4906

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) JEFFERY BENNET	Date of Receipt																				
Mailing Address 3 LOS RANCHOS ESTATES	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	8		2	0	0	7												
City State Zip Code ALPINE TX 79830	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>	20.00																			
20.00																					
Name of Employer Occupation	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼																				
Transaction ID: SA17A.4933	<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>	20.00																			
20.00																					
<b>B.</b> Full Name (Last, First, Middle Initial) TERRY BENNET	Date of Receipt																				
Mailing Address 151 SOUTH MAIN STREET	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	6		2	0	0	7												
City State Zip Code ROCHESTER NH 03867	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Name of Employer Occupation SELF EMPLOYED MEDICAL DOCTOR	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼																				
Transaction ID: SA17A.5086	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
<b>C.</b> Full Name (Last, First, Middle Initial) DAN BERGER	Date of Receipt																				
Mailing Address 275 WEST 96TH ST, APT 4C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	1		2	0	0	7												
City State Zip Code NEW YORK NY 10025	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Name of Employer Occupation US HOUSE OF REPRESENTATIVES CONGRESSIONAL AIDE	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼																				
Transaction ID: SA17A.4920	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					

**SUBTOTAL** of Receipts This Page (optional) .....

370.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ERICA BERNSTEIN

Mailing Address

P.O. BOX 6895

City

RADFORD

State

VA

Zip Code

24142

FEC ID number of contributing  
federal political committee.Name of Employer  
STUDENTOccupation  
STUDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.5155

B.

Full Name (Last, First, Middle Initial)

RACHEL BEVILACQUA

Mailing Address

728 IST AVE

City

COLUMBUS

State

OH

Zip Code

30901

FEC ID number of contributing  
federal political committee.Name of Employer  
SELF EMPLOYEDOccupation  
TRANSCRIPTIONIST

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	6	/	2	0	0	7

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Transaction ID: SA17A.5048

C.

Full Name (Last, First, Middle Initial)

ALLAN BICKLEY

Mailing Address

6130 OLD MIDDLETON ROAD

City

MADISON

State

WI

Zip Code

53705

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.4987

SUBTOTAL of Receipts This Page (optional) .....

170.00

TOTAL This Period (last page this line number only) .....



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

DAVE BLACK

Mailing Address

34975 Aspenwood Lane

City

WILLOUGHBY

State

OH

Zip Code

44094

FEC ID number of contributing  
federal political committee.

Name of Employer  
Britton Gallagher

Occupation

INSURANCE SALES

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Transaction ID: SA17A.5131

B.

Full Name (Last, First, Middle Initial)

G BLAIR

Mailing Address

3295 CIMARRON TRAIL

City

MURFREESBORO

State

TN

Zip Code

37129

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation

BUILDING CONTRACTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5064

C.

Full Name (Last, First, Middle Initial)

MICHAEL BRACE

Mailing Address

8166 DAY PIKE

City

MAYSVILLE

State

KY

Zip Code

41086

FEC ID number of contributing  
federal political committee.

Name of Employer  
Emerson Power Transmission

Occupation

R&D Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

200.00

DONATION

Transaction ID: SA17A.5122

SUBTOTAL of Receipts This Page (optional) .....

260.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

DAN BREINDEL

Mailing Address

400 E. 20TH STREET APT 9H

City

NEW YORK

State

NY

Zip Code

10009

FEC ID number of contributing  
federal political committee.

Name of Employer  
THE COLBERT REPORT

Occupation  
STUDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5201

B.

Full Name (Last, First, Middle Initial)

JOSHUA CAREY

Mailing Address

190 Kelsey Road

City

CANDOR

State

NY

Zip Code

13743

FEC ID number of contributing  
federal political committee.

Name of Employer  
STUDENT

Occupation  
STUDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.5078

C.

Full Name (Last, First, Middle Initial)

ANNONYMOUS CASH

Mailing Address

DEMOCRATIC PARTY WISCONSIN

City

WATERDOWN

State

WI

Zip Code

53094

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

38.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

38.00

DONATION

Transaction ID: SA17A.5026

SUBTOTAL of Receipts This Page (optional) .....

138.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
MURTY CHALLA

Mailing Address  
8630 HAYSHED LANE

City State Zip Code  
COLUMBIA MD 21045

FEC ID number of contributing  
federal political committee.

Name of Employer  
INSTITUTE FOR DEFENCE ANALYSIS

Occupation  
DEFENCE RESEARCH

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5179

B.

Full Name (Last, First, Middle Initial)  
MATTHEW CICCARIELLO

Mailing Address  
1126A O'NEIL ST

City State Zip Code  
PHILADELPHIA PA 19123

FEC ID number of contributing  
federal political committee.

Name of Employer  
AT&T

Occupation  
NETWORK ENGINEER

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.4996

C.

Full Name (Last, First, Middle Initial)  
JAMES CLANCEY

Mailing Address  
130 HARDWOOD LN

City State Zip Code  
NEGAUNEE MI 49866

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5157

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JOHN COKES

Mailing Address

729 Howard Avenue

City

WENONAH

State

NJ

Zip Code

08090

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.4931

B.

Full Name (Last, First, Middle Initial)

DAVID DANIELS

Mailing Address

1912 CLINTON AVE S, APT 205

City

MINNEAPOLIS

State

MN

Zip Code

55404

FEC ID number of contributing  
federal political committee.

Name of Employer  
NORTHERN SUN MERCHANDISING

Occupation  
RETAIL

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.4991

C.

Full Name (Last, First, Middle Initial)

RAY DES ROCHES

Mailing Address

8 PENINSULA CIRCLE

City

POCASSET

State

MA

Zip Code

02559

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
TEACHER

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

0.00

DONATION

Transaction ID: SA17A.5050

SUBTOTAL of Receipts This Page (optional) .....

45.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JONATHAN DUERBECK

Mailing Address

708 N. Chyenne

City

TULSA

State

OK

Zip Code

74106

FEC ID number of contributing  
federal political committee.Name of Employer  
TULSA PUBLIC SCHOOLS

Occupation

SUB TEACHER

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

0.00

DONATION

Transaction ID: SA17A.5181

B.

Full Name (Last, First, Middle Initial)

JASON DUSICH

Mailing Address

Univ of California Van Ness Ave

City

SAN FRANCISCO

State

CA

Zip Code

94102

FEC ID number of contributing  
federal political committee.Name of Employer  
Univ of California

Occupation

Student

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

10.00

DONATION

Transaction ID: SA17A.5176

C.

Full Name (Last, First, Middle Initial)

Hon. DANIEL EATON

Mailing Address

1 Shedd Hill Rd

City

STODDARD

State

NH

Zip Code

03464

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

15.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.5133

SUBTOTAL of Receipts This Page (optional) .....

25.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) HUNTER EDWARDS			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y															
0	2		1	4		2	0	0	7															
Mailing Address 203 W. LOCKHART AVE																								
City	State	Zip Code																						
ALPINE	TX	79830																						
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>		50.00																			
50.00																								
Name of Employer Texas Proving Ground		Occupation MECHANICAL ENGINEER																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>			50.00																			
50.00																								
			DONATION																					
			Transaction ID: SA17A.5028																					
<b>B.</b> Full Name (Last, First, Middle Initial) BILL ELLIS			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y															
0	2		0	9		2	0	0	7															
Mailing Address 11 Lake St. Box 567																								
City	State	Zip Code																						
RANGELEY	ME	04970																						
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>		50.00																			
50.00																								
Name of Employer SELF EMPLOYED		Occupation Physicist																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>			50.00																			
50.00																								
			DONATION																					
			Transaction ID: SA17A.5108																					
<b>C.</b> Full Name (Last, First, Middle Initial) DARIUS ENGEL			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y															
0	2		2	6		2	0	0	7															
Mailing Address P.O. Box 117330																								
City	State	Zip Code																						
GAINSVILLE	FL	32611																						
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">5.00</td> </tr> </table>		5.00																			
5.00																								
Name of Employer UNIVERSITY OF FLORIDA		Occupation RESERCHER																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">5.00</td> </tr> </table>			5.00																			
5.00																								
			DONATION																					
			Transaction ID: SA17A.5059																					

SUBTOTAL of Receipts This Page (optional) .....

105.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) ROSIE ENGMAN	Date of Receipt
Mailing Address 1525 Gridley Ln	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 2 / 1 0 / 2 0 0 7</div> </div>
City State Zip Code SILVER SPRING MD 20902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<div> <div></div> <div>30.00</div> </div>
Name of Employer Occupation RETIRED TEACHER	DONATION
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div> <div></div> <div>30.00</div> </div>
<b>Transaction ID: SA17A.5099</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) ROSIE ENGMAN	Date of Receipt
Mailing Address 1525 Gridley Ln	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 2 / 1 0 / 2 0 0 7</div> </div>
City State Zip Code SILVER SPRING MD 20902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<div> <div></div> <div>30.00</div> </div>
Name of Employer Occupation RETIRED TEACHER	DONATION
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div> <div></div> <div>60.00</div> </div>
<b>Transaction ID: SA17A.5101</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) DOUGLAS ERICKSON	Date of Receipt
Mailing Address 1262 Park PLAZA DRIVE	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 2 / 1 4 / 2 0 0 7</div> </div>
City State Zip Code COLUMBUS OH 43213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<div> <div></div> <div>500.00</div> </div>
Name of Employer Occupation Mike Appleton consultant	DONATION
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div> <div></div> <div>500.00</div> </div>
<b>Transaction ID: SA17A.5018</b>	

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ARTHUR ESCOBAR

Mailing Address

6819 HOWARD ST

City

NICE

State

CA

Zip Code

95464

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5052

B.

Full Name (Last, First, Middle Initial)

ARTHUR ESCOBAR

Mailing Address

6819 HOWARD ST

City

NICE

State

CA

Zip Code

95464

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5054

C.

Full Name (Last, First, Middle Initial)

MIKE EVENSON

Mailing Address

P.O BOX 157

City

PRETORIA

State

CA

Zip Code

95558

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
TIMBER AND CATTLE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 3 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5189

SUBTOTAL of Receipts This Page (optional) .....

95.00

TOTAL This Period (last page this line number only) .....



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
DANIEL FEIDT

Mailing Address  
1511 GRAND AVE APT 15

City State Zip Code  
ST PAUL MN 55105

FEC ID number of contributing  
federal political committee.

Name of Employer  
POLITICS IN MINNESOTA

Occupation  
CONTRIBUTING WRITER

Receipt For: 2007  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
15.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

15.00

DONATION

Transaction ID: SA17A.5197

B.

Full Name (Last, First, Middle Initial)  
GARY FISHER

Mailing Address  
1155 University Blvd Se

City State Zip Code  
Albuquerque NM 87106

FEC ID number of contributing  
federal political committee.

Name of Employer  
Lockheed Martin

Occupation  
Technician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 9 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5139

C.

Full Name (Last, First, Middle Initial)  
NICHOLAS GIANAKOS

Mailing Address  
19 TOKAY CT

City State Zip Code  
PLEASANT CA 94523

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5011

SUBTOTAL of Receipts This Page (optional) .....

65.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) IRA GLADNICK Mailing Address UNIVERSITY OF CALIFORNIA City State Zip Code SANTA BARBARA CA 93101 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 7 Amount of Each Receipt this Period 15.00 DONATION Transaction ID: SA17A.5004
<b>B.</b> Full Name (Last, First, Middle Initial) PATRICIA GLASER Mailing Address 521 ALAMEDA AVE City State Zip Code FIRCREST WA 98466 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 9 / 2 0 0 7 Amount of Each Receipt this Period 10.00 DONATION Transaction ID: SA17A.5203
<b>C.</b> Full Name (Last, First, Middle Initial) FRED GOLAN Mailing Address 2125 PATRICIAL AVE City State Zip Code LOS ANGELES CA 90025 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 7 Amount of Each Receipt this Period 50.00 DONATION Transaction ID: SA17A.5125

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JEFFREY GOOD

Mailing Address

2400 Palmer Ave

City

NEW ORLEANS

State

LA

Zip Code

70118

FEC ID number of contributing  
federal political committee.

Name of Employer  
STUDENT

Occupation  
STUDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5137

B.

Full Name (Last, First, Middle Initial)

JOHN GRANCHIE

Mailing Address

735 CRESTVIEW

City

BOARDMAN

State

OH

Zip Code

44512

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
MINISTER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5206

C.

Full Name (Last, First, Middle Initial)

JOHN GRANCHIE

Mailing Address

735 CRESTVIEW

City

BOARDMAN

State

OH

Zip Code

44512

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
MINISTER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 9 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5114

SUBTOTAL of Receipts This Page (optional) .....

70.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

EDWARD GRANT

Mailing Address

12215 Benson Branch Rd

City

ELLCOT CITY

State

MD

Zip Code

21042

FEC ID number of contributing  
federal political committee.

Name of Employer  
GRANT ANTIQUES

Occupation

ANTIQUES DEALER

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5127

B.

Full Name (Last, First, Middle Initial)

DONALD GRBAC

Mailing Address

185 Overbrook Road

City

VALENCIA

State

PA

Zip Code

16059

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation

COMPUTER ANALYST

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5069

C.

Full Name (Last, First, Middle Initial)

DONALD HALL

Mailing Address

2874 FM 2749

City

THORNTON

State

TX

Zip Code

76687

FEC ID number of contributing  
federal political committee.

Name of Employer  
RVA

Occupation

ATCS-T

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

40.00

DONATION

Transaction ID: SA17A.4918

**SUBTOTAL** of Receipts This Page (optional) .....

140.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JEFFREY HARLEY

Mailing Address

930 South 23rd Street

City

FORTE GEORGE

State

IA

Zip Code

50501

FEC ID number of contributing  
federal political committee.

Name of Employer  
Fort Dodge Animal Health

Occupation

QUALITY SCIENTIST

Receipt For: 2000

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 9 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5111

B.

Full Name (Last, First, Middle Initial)

JEFFREY HARLEY

Mailing Address

930 South 23rd Street

City

FORTE GEORGE

State

IA

Zip Code

50501

FEC ID number of contributing  
federal political committee.

Name of Employer  
Fort Dodge Animal Health

Occupation

QUALITY SCIENTIST

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

65.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

40.00

DONATION

Transaction ID: SA17A.5113

C.

Full Name (Last, First, Middle Initial)

MICHAEL HUREUX

Mailing Address

9658 25TH AVE SW

City

SEATTLE

State

WA

Zip Code

98106

FEC ID number of contributing  
federal political committee.

Name of Employer  
SEATTLE PUBLIC SCHOOLS

Occupation

TEACHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5195

SUBTOTAL of Receipts This Page (optional) .....

115.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JAMES HURT

Mailing Address

P.O.BOX 322

City

SAVOY

State

IL

Zip Code

61874

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.4984

B.

Full Name (Last, First, Middle Initial)

MICHAEL JANISZEWSKI

Mailing Address

2625 Two Rock Court

City

ALPHARETTA

State

GA

Zip Code

30004

FEC ID number of contributing  
federal political committee.

Name of Employer  
STUDENT

Occupation  
STUDENT

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATIONS

Transaction ID: SA17A.5030

C.

Full Name (Last, First, Middle Initial)

JEFFEREY JILEK

Mailing Address

3680 COUNTRY WOODS CT

City

NEEHAN

State

WI

Zip Code

54956

FEC ID number of contributing  
federal political committee.

Name of Employer  
BERBEE

Occupation  
SALES

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

Amount of Each Receipt this Period

500.00

DONATIONS

Transaction ID: SA17A.4998

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
MAHER JOSEPHSON

Mailing Address  
4209 LLOYD AVE SE

City State Zip Code  
IOWA CITY ID 52240

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATIONS

Transaction ID: SA17A.5042

B.

Full Name (Last, First, Middle Initial)  
FRED KEIP

Mailing Address  
2388 Midway Ave

City State Zip Code  
GRANTS PASS OR 97257

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5120

C.

Full Name (Last, First, Middle Initial)  
Donald Kemmer

Mailing Address  
16326 Black Cherry Drive

City State Zip Code  
Wildwood MT 63040

FEC ID number of contributing  
federal political committee.

Name of Employer  
THE DEMOCRACY FOUNDATION

Occupation  
PRESIDENT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5124

SUBTOTAL of Receipts This Page (optional) .....

175.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ROBERT KEZELIS

Mailing Address

6151 W 125TH PLACE

City

PALOS HEIGHTS

State

IL

Zip Code

60463

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
AUTHOR

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5199

B.

Full Name (Last, First, Middle Initial)

MARCIA KIELISZEWSKI

Mailing Address

5251 RAYMAR DR

City

ALBANY

State

OH

Zip Code

45710

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATIONS

Transaction ID: SA17A.5014

C.

Full Name (Last, First, Middle Initial)

LUCAS KUMMER

Mailing Address

2703 Thoman Pl

City

TOLEDO

State

OH

Zip Code

43601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.4929

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....



# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

SUSAN LAFLEUR

Mailing Address

508 ESTRADA BLVD

City

BELLBILLR

State

MI

Zip Code

48111

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5062

B.

Full Name (Last, First, Middle Initial)

NORMAN LEPPERT

Mailing Address

P.O. BOX 3027

City

PIMMIT

State

VA

Zip Code

22043

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5076

C.

Full Name (Last, First, Middle Initial)

SCOTT LEWIS

Mailing Address

3123 47TH ST

City

ASTORIA

State

NY

Zip Code

11103

FEC ID number of contributing  
federal political committee.

Name of Employer  
OGILVY HEALTHWORLD

Occupation  
COPY SUPERVISOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.4912

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) JASON LORD Mailing Address 1618 GOLDRUSH ROAD City State Zip Code BULLHEAD CITY AZ 86442 FEC ID number of contributing federal political committee. Name of Employer NEWS WEST PUBLISHING Occupation GRAPHIC DESIGNER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 25.00	Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 7 Amount of Each Receipt this Period 25.00 CONTRIBUTION Transaction ID: SA17A.5066
<b>B.</b> Full Name (Last, First, Middle Initial) MARJORIE LORSBACH Mailing Address 3741 N SHORE DRIVE City State Zip Code WILLIAMSTOWN NJ 08094 FEC ID number of contributing federal political committee. Name of Employer RETIRED Occupation EDUCATOR Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 25.00	Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Amount of Each Receipt this Period 25.00 DONATION Transaction ID: SA17A.5191
<b>C.</b> Full Name (Last, First, Middle Initial) RICHARD LUNBERY Mailing Address P.O. Box 275 City State Zip Code TRES PIEDRAS NM 87577 FEC ID number of contributing federal political committee. Name of Employer Retired Occupation Carpenter Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 100.00	Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 1 / 2 0 0 7 Amount of Each Receipt this Period 100.00 DONATION Transaction ID: SA17A.5093

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
DUNCAN MACKINNON

Mailing Address  
1817 MACARTHUR DR

City State Zip Code  
MCLEAN VA 22101

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5024

B.

Full Name (Last, First, Middle Initial)  
ROBERT MANN

Mailing Address  
557 BROADWAY

City State Zip Code  
ONEIDA NY 13421

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation  
writer

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.4993

C.

Full Name (Last, First, Middle Initial)  
MICHAEL MARINO

Mailing Address  
969-G EDGEWATER BLVD #798

City State Zip Code  
FOSTER CITY CA 94404

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
PRESIDENT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.4922

SUBTOTAL of Receipts This Page (optional) .....

200.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MICHAEL MARINO

Mailing Address

969-G EDGEWATER BLVD #798

City

FOSTER CITY

State

CA

Zip Code

94404

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation

PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.4928

B.

Full Name (Last, First, Middle Initial)

HAROLD MARKS

Mailing Address

P. O BOX 72508

City

FAIRBANKS

State

AK

Zip Code

99707

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation

CARPENTER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 3 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5074

C.

Full Name (Last, First, Middle Initial)

SLADE MEAD

Mailing Address

717 WEST AMBERWOOD DRIVE

City

PHOENIX

State

AZ

Zip Code

85045

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.5161

SUBTOTAL of Receipts This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JAMES MELLMAN

Mailing Address

UNIVERSITY OF FLORIDA, BOX 114000

City

Gainesville

State

FL

Zip Code

32611

FEC ID number of contributing  
federal political committee.Name of Employer  
UNIVERSITY OF FLORIDAOccupation  
STUDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	4	/	2	0	0	7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5174

B.

Full Name (Last, First, Middle Initial)

ELISAVETA MOLLOVA

Mailing Address

WASHINGTON

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	7

Amount of Each Receipt this Period

0.01

DONATION

Transaction ID: SA17A.4916

C.

Full Name (Last, First, Middle Initial)

ELLEN NAKAMURA

Mailing Address

3592 RIDGE MEADOW ST

City

LAS VEGAS

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.Name of Employer  
ROYAL MANAGEMENTOccupation  
COLLECTIONS

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	7

Amount of Each Receipt this Period

10.00

DONATIONS

Transaction ID: SA17A.4994

SUBTOTAL of Receipts This Page (optional) .....

30.01

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

James Nathan

Mailing Address

P.O. Box 244023

City

Montgomery

State

AL

Zip Code

36124

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

200.00

DONATION

Transaction ID: SA17A.5168

B.

Full Name (Last, First, Middle Initial)

GEORGE NIMRI

Mailing Address

477 LIGHTHOUSE AVE

City

PACIFIC GROVE

State

CA

Zip Code

93950

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation

RESTAURANT OWNER

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5165

C.

Full Name (Last, First, Middle Initial)

MANUEL NORAT

Mailing Address

601 E NORTHERNLIGHTS BLVD

City

ANCHORAGE

State

AK

Zip Code

99503

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

250.00

DONATION

Transaction ID: SA17A.5009

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
C O'HARE

Mailing Address  
100 SHELTER AVE

City State Zip Code  
SHAMOKIN DAM PA 17876

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNEMPLOYED

Occupation  
UNEMPLOYED

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
20.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5183

B.

Full Name (Last, First, Middle Initial)  
GLORIA OLSON

Mailing Address  
3154 SE 17th Ave

City State Zip Code  
ALBANY OR 97322

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5089

C.

Full Name (Last, First, Middle Initial)  
JEANNINE OSTERUDE

Mailing Address  
6660 CANOE HILL DRIVE

City State Zip Code  
SPARKS NV 89436

FEC ID number of contributing  
federal political committee.

Name of Employer  
DESIGN OUTDOOR

Occupation  
BOOKKEEPER

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
25.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5000

SUBTOTAL of Receipts This Page (optional) .....

95.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JOHN PAAYNE

Mailing Address

11885 FARMSIDE RD

City

ELLICOT

State

MD

Zip Code

21042

FEC ID number of contributing  
federal political committee.

Name of Employer  
JOHN C PAYNE MD

Occupation  
PYSICIAN

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATIONS

Transaction ID: SA17A.5038

B.

Full Name (Last, First, Middle Initial)

CHRISTOPHER PAUL

Mailing Address

9 GENERAL AMHERST RD

City

AMHERST

State

NH

Zip Code

03031

FEC ID number of contributing  
federal political committee.

Name of Employer  
STUDENT

Occupation  
STUDENT

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.4992

C.

Full Name (Last, First, Middle Initial)

ELIZABETH PAULSON

Mailing Address

3936 FULTON ST., NW

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
INSURANCE CONSULTANT

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

75.00

DONATION

Transaction ID: SA17A.4990

SUBTOTAL of Receipts This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

DEBORAH PETRI

Mailing Address

761 VIOLET MEADOW ST

City

S TACOMA

State

WA

Zip Code

98444

FEC ID number of contributing  
federal political committee.Name of Employer  
SELF EMPLOYED

Occupation

FUND RAISER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	0	7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5082

B.

Full Name (Last, First, Middle Initial)

RS PIEDMONTE

Mailing Address

P.O. BOX 3661

City

WEST WENDOVER

State

NV

Zip Code

89883

FEC ID number of contributing  
federal political committee.Name of Employer  
SELF EMPLOYED

Occupation

TEACHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	0	7

Amount of Each Receipt this Period

60.00

DONATION

Transaction ID: SA17A.5193

C.

Full Name (Last, First, Middle Initial)

GUSTAVE RABSON

Mailing Address

17 IRS WAY

City

HAVERHILL

State

MA

Zip Code

01830

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIRED

Occupation

TEACHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	0	7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5187

SUBTOTAL of Receipts This Page (optional) .....

135.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Paul Raynault

Mailing Address

214 North Woodland Street

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

Name of Employer  
Raynault Foundation

Occupation  
President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

500.00

DONATION

Transaction ID: SA17A.5173

B.

Full Name (Last, First, Middle Initial)

HARVEY RENDEL

Mailing Address

19451 Sherman Way

City

CANOGA

State

CA

Zip Code

91304

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF-EMPLOYED

Occupation  
PHOTOGRAPHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5046

C.

Full Name (Last, First, Middle Initial)

AARON ROLAND

Mailing Address

3433 21ST ST

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
DOCTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 3 / 2 0 0 7

Amount of Each Receipt this Period

250.00

DONATION

Transaction ID: SA17A.5080

SUBTOTAL of Receipts This Page (optional) .....

775.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
LAWRENCE ROTHENBERG

Mailing Address  
13101 RIDGE DRIVE

City State Zip Code  
ROCKVILLE MD 20850

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

500.00

DONATION

Transaction ID: SA17A.5020

B.

Full Name (Last, First, Middle Initial)  
MICHAEL RYAN

Mailing Address  
25 Patton Road

City State Zip Code  
DEVENS MA 01434

FEC ID number of contributing  
federal political committee.

Name of Employer  
Johnson Matthey Pharma Se-  
rvice

Occupation  
CHEMIST

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5002

C.

Full Name (Last, First, Middle Initial)  
CRISPIN SARTWELL

Mailing Address  
1107 W. Forrest Ave

City State Zip Code  
GLEN ROCK PA 17327

FEC ID number of contributing  
federal political committee.

Name of Employer  
Dickinson College

Occupation  
Philosophy Professor

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5084

SUBTOTAL of Receipts This Page (optional) .....

650.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
EDWARD SAVELA

Mailing Address  
1416 Buckhead Road

City State Zip Code  
VESTAVIA HILLS AL 35206

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF EMPLOYED

Occupation  
EXECUTIVE

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5135

B.

Full Name (Last, First, Middle Initial)  
GARY SCHREINER

Mailing Address  
19 W. Main St.

City State Zip Code  
OYSTER BAY NY 11771

FEC ID number of contributing  
federal political committee.

Name of Employer  
Gary B. Schreiner, Attorn-  
ey At

Occupation  
ATTORNEY

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5129

C.

Full Name (Last, First, Middle Initial)  
HARRIET SCHWOCH

Mailing Address  
203 OAK HILL COURT

City State Zip Code  
WATERTOWN WI 53094

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5016

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JUDITH SCOTT

Mailing Address

538 NORTHPARK DRIVE

City

LA CURGES

State

NM

Zip Code

88005

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATIONS

Transaction ID: SA17A.5032

B.

Full Name (Last, First, Middle Initial)

FRED SEGER

Mailing Address

4501 N CAMINO DEL RAY

City

TUCSON

State

AZ

Zip Code

85718

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5044

C.

Full Name (Last, First, Middle Initial)

THOMAS SHAW

Mailing Address

12334 COLERAINE CT

City

RESTON

State

VA

Zip Code

20191

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

25.00

DONATIONS

Transaction ID: SA17A.5055

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.	Full Name (Last, First, Middle Initial) Sylvia Shih		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7	
	Mailing Address 2754 Vista del Toro		Amount of Each Receipt this Period 500.00	
	City Salinas	State CA		
	FEC ID number of contributing federal political committee.		DONATION	
	Name of Employer Occupation Retired			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		Transaction ID: SA17A.5170
B.	Full Name (Last, First, Middle Initial) STUART SILVERMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 7	
	Mailing Address 223 ROLLING TAL		Amount of Each Receipt this Period 100.00	
	City HOT SPRINGS	State AZ		
	FEC ID number of contributing federal political committee.		DONATION	
	Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 100.00		Transaction ID: SA17A.4989
C.	Full Name (Last, First, Middle Initial) THOMAS SKULAN		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 6 / 2 0 0 7	
	Mailing Address 250 Steeles Bottom Road		Amount of Each Receipt this Period 20.00	
	City WARSAW	State KY		
	FEC ID number of contributing federal political committee.		DONATION	
	Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 20.00		Transaction ID: SA17A.5060

SUBTOTAL of Receipts This Page (optional) .....

620.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
SUREERATT SMITH

Mailing Address  
109 GLEN ECHO DR

City State Zip Code  
SMYRNA TN 37167

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

15.00

DONATION

Transaction ID: SA17A.4986

B.

Full Name (Last, First, Middle Initial)  
RICH SMYRNIOS

Mailing Address  
10330 PQ AVE

City State Zip Code  
MATTAWA MI 49071

FEC ID number of contributing  
federal political committee.

Name of Employer  
KPS

Occupation  
TEACHER

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.4910

C.

Full Name (Last, First, Middle Initial)  
EMIL STOCKTON

Mailing Address  
614 Jennil LN

City State Zip Code  
MOUND HOUSE NV 89706

FEC ID number of contributing  
federal political committee.

Name of Employer  
USGS

Occupation  
Hydrologic Technician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5104

SUBTOTAL of Receipts This Page (optional) .....

55.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JAMES STOUT

Mailing Address

5027 18TH AVE N.

City

ST PETE

State

FL

Zip Code

33710

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

125.00

DONATIONS

Transaction ID: SA17A.5036

B.

Full Name (Last, First, Middle Initial)

FRANK THIESS

Mailing Address

204 Prospect Ave

City

HOOD RIVER

State

OR

Zip Code

97031

FEC ID number of contributing  
federal political committee.

Name of Employer

RETIRED

Occupation

Physicist

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5091

C.

Full Name (Last, First, Middle Initial)

RICHARD THOMAS

Mailing Address

535 ROGERS AVENUE

City

WEST SPRINGFIELD

State

MA

Zip Code

01089

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

RETIRED

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

600.00

CONTRIBUTION

Transaction ID: SA17A.5071

SUBTOTAL of Receipts This Page (optional) .....

825.00

TOTAL This Period (last page this line number only) .....



# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

TRUIT TROWBRIDGE

Mailing Address

13461 SPARREN CT

City

SAN DIAGO

State

CA

Zip Code

92129

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5118

B.

Full Name (Last, First, Middle Initial)

PATRICK WASHINGTON

Mailing Address

P.O. BOX 83

City

FT DRUM

State

NY

Zip Code

13603

FEC ID number of contributing  
federal political committee.Name of Employer  
US ARMYOccupation  
FINANCE

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	0	7

Amount of Each Receipt this Period

10.00

DONATION

Transaction ID: SA17A.5185

C.

Full Name (Last, First, Middle Initial)

JUDITH WEISS

Mailing Address

27 GABLE LANE

City

HICKSVILLE

State

NY

Zip Code

11801

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	7

Amount of Each Receipt this Period

10.00

DONATION

Transaction ID: SA17A.4988

SUBTOTAL of Receipts This Page (optional) .....

45.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 79

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

STEPHEN WESSELS

Mailing Address

7055 NW Mt. View Dr.

City

CORVALLIS

State

OR

Zip Code

97330

FEC ID number of contributing  
federal political committee.

Name of Employer  
US Post Office

Occupation

MAIL CARRIER

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

DONATION

Transaction ID: SA17A.5095

B.

Full Name (Last, First, Middle Initial)

JOHN WETHERBY

Mailing Address

6050 Alpine Woods Dr.

City

ANKORAGE

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

Name of Employer  
ANTHC

Occupation

PHYSICIAN

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.5102

C.

Full Name (Last, First, Middle Initial)

RICHARD WIKERSHAM

Mailing Address

1835 NIGEL CT

City

VIENNA

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.4982

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 79

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ANDREW WILLIAMS

Mailing Address

6741 LINCOLN AV #148

City

BUENA PARK

State

CA

Zip Code

90620

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	7

Amount of Each Receipt this Period

20.00

DONATION

Transaction ID: SA17A.5022

B.

Full Name (Last, First, Middle Initial)

DICK WILZ

Mailing Address

557 Kents Mill Drive Louisa

City

LOUISA

State

VA

Zip Code

23093

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIREDOccupation  
ENGINEER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

25.00

DONATION

Transaction ID: SA17A.5116

C.

Full Name (Last, First, Middle Initial)

PATRICIA WISCH

Mailing Address

1919 CHESTNUT ST #1805

19103

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	0	7

Amount of Each Receipt this Period

100.00

DONATION

Transaction ID: SA17A.4983

SUBTOTAL of Receipts This Page (optional) .....

145.00

TOTAL This Period (last page this line number only) .....

11118.01

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 79

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.Name of Employer  
Retired SenatorOccupation  
Retired

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

69906.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

806.74

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5215

B.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.Name of Employer  
Retired SenatorOccupation  
Retired

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

70088.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	7

Amount of Each Receipt this Period

181.87

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5217

C.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.Name of Employer  
Retired SenatorOccupation  
Retired

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

70184.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	0	7

Amount of Each Receipt this Period

95.70

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5220

SUBTOTAL of Receipts This Page (optional) .....

1084.31

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 79

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.Name of Employer  
Retired SenatorOccupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

71684.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	7

Amount of Each Receipt this Period

1500.00

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5216

B.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.Name of Employer  
Retired SenatorOccupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

71727.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	7

Amount of Each Receipt this Period

43.59

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5219

C.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.Name of Employer  
Retired SenatorOccupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

72727.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Receipt this Period

1000.00

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5221

SUBTOTAL of Receipts This Page (optional) .....

2543.59

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 79

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address

1600 NO OAK ST APT 1412

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired Senator

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

73515.73

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

787.83

LOAN RECEIVED FROM THE CA-  
NDIDATE

Transaction ID: SA19A.5218

SUBTOTAL of Receipts This Page (optional) .....

787.83

TOTAL This Period (last page this line number only) .....

4415.73

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 79

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN Mailing Address 1401 N Taft #625	<b>Transaction ID:</b> SB23.4848 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 6 / 2 0 0 7</div> </div>
City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement CONSULTING FEES - MEDIA Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>101</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN Mailing Address 1401 N Taft #625 City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement CONSULTING FEES - MEDIA Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.5233 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>101</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN Mailing Address 1401 N Taft #625 City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.4873 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>101</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3000.00

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 79

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) ALEXANDER S COLVIN Mailing Address 1401 N Taft #625	<b>Transaction ID:</b> SB23.4889 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>
City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement CONSULTING FEES - PRESS Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <div>101</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) COMCAST ONLINE Mailing Address P.O. BOX 196 City NEWARK State NJ Zip Code 07101 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.5226 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>197.08</div> <div>101</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) COMCAST ONLINE Mailing Address P.O. BOX 196 City NEWARK State NJ Zip Code 07101 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.5230 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 8 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>553.91</div> <div>101</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1250.99

**TOTAL** This Period (last page this line number only) ..... ►



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 79

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) <b>DESIGN KILN</b></p> <p>Mailing Address <b>959 OURAY</b></p> <p>City <b>GRAND JUNCTION</b> State <b>CO</b> Zip Code <b>81501</b></p> <p>Purpose of Disbursement <b>PRINTING</b></p> <p>Candidate Name <b>MIKE GRAVEL FOR PRESIDENT 2008</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5224 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <b>0 2 / 2 5 / 2 0 0 7</b></p> <p><b>Amount of Each Disbursement this Period</b> <b>1500.00</b></p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) <b>ENTERPRISE RENT-A-CAR</b></p> <p>Mailing Address <b>5800 FLEUR DR</b></p> <p>City <b>DES MOINES</b> State <b>IA</b> Zip Code <b>50321</b></p> <p>Purpose of Disbursement <b>TRAVEL EXPENSES</b></p> <p>Candidate Name <b>MIKE GRAVEL FOR PRESIDENT 2008</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5207 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <b>0 2 / 2 1 / 2 0 0 7</b></p> <p><b>Amount of Each Disbursement this Period</b> <b>84.80</b></p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) <b>FLORAL PARK MOTOR LODGE</b></p> <p>Mailing Address <b>30 Jericho Tpke</b></p> <p>City <b>Floral Park</b> State <b>NY</b> Zip Code <b>11001</b></p> <p>Purpose of Disbursement <b>TRAVEL EXPENSES</b></p> <p>Candidate Name <b>MIKE GRAVEL FOR PRESIDENT 2008</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4884 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <b>0 3 / 2 3 / 2 0 0 7</b></p> <p><b>Amount of Each Disbursement this Period</b> <b>72.55</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1657.35**

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 79

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HAMPTON INNS & SUITES

Mailing Address 10599 PROFESSIONAL CIRCLE

City RENO State NV Zip Code 89511

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4862

Date of Disbursement

/   /

Amount of Each Disbursement this Period

108.90

B.

Full Name (Last, First, Middle Initial)

ELLIOT JACOBSON

Mailing Address 1101 3RD STREET, SW  
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement  
CONSULTING FOR MEDIA AND FUNDRAISING

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4827

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

ELLIOT JACOBSON

Mailing Address 1101 3RD STREET, SW  
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4828

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional) .....

3158.90

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) ELLIOT JACOBSON	<b>Transaction ID:</b> SB23.4888 <b>Date of Disbursement</b>																				
Mailing Address 1101 3RD STREET, SW APT201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	7												
City WASHINGTON State DC Zip Code 20021	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTING FOR MEDIA AND FUNDRAISING	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS	<b>Transaction ID:</b> SB23.4829 <b>Date of Disbursement</b>																				
Mailing Address One Concourse Pkwy Suite 300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	7												
City Atlanta State GA Zip Code 30328	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES	<table border="1"> <tr> <td colspan="10">60.00</td> </tr> </table>	60.00																			
60.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS	<b>Transaction ID:</b> SB23.4837 <b>Date of Disbursement</b>																				
Mailing Address One Concourse Pkwy Suite 300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	7												
City Atlanta State GA Zip Code 30328	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES	<table border="1"> <tr> <td colspan="10">60.00</td> </tr> </table>	60.00																			
60.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

620.00

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 79

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House ☐ Senate ☒ President  
State: District: Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4870

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
KELLY PHONG

Mailing Address 600 BLANDFORD ST

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement  
CONSULTANT FEES - CAMPAIGN LOGISTICS

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House ☐ Senate ☒ President  
State: District: Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4850

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
KELLY PHONG

Mailing Address 600 BLANDFORD ST

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement  
CONSULTANT FEES - CAMPAIGN LOGISTICS

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House ☐ Senate ☒ President  
State: District: Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 79

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) KELLY PHONG	<b>Transaction ID:</b> SB23.4901 <b>Date of Disbursement</b>																				
Mailing Address 600 BLANDFORD ST	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	7												
City ROCKVILLE State MD Zip Code 20850	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTANT FEES - CAMPAIGN LOGISTICS	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) KELLY PHONG	<b>Transaction ID:</b> SB23.4897 <b>Date of Disbursement</b>																				
Mailing Address 600 BLANDFORD ST	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	7												
City ROCKVILLE State MD Zip Code 20850	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONSULTANT FEES - CAMPAIGN LOGISTICS	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
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<b>C.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE	<b>Transaction ID:</b> SB23.4838 <b>Date of Disbursement</b>																				
Mailing Address 810 7TH AVENUE, 32ND FLOOR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	2		2	0	0	7												
City NEW YORK State NY Zip Code 10019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MEDIA EXPENSES	<table border="1"> <tr> <td colspan="10">245.00</td> </tr> </table>	245.00																			
245.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
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**SUBTOTAL** of Disbursements This Page (optional) .....

1745.00

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE	<b>Transaction ID:</b> SB23.4840 <b>Date of Disbursement</b>																				
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M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	2		2	0	0	7												
City NEW YORK State NY Zip Code 10019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MEDIA EXPENSES	<table border="1"> <tr> <td>245.00</td> </tr> </table>	245.00																			
245.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE	<b>Transaction ID:</b> SB23.4841 <b>Date of Disbursement</b>																				
Mailing Address 810 7TH AVENUE, 32ND FLOOR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	2		2	0	0	7												
City NEW YORK State NY Zip Code 10019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MEDIA EXPENSES	<table border="1"> <tr> <td>245.00</td> </tr> </table>	245.00																			
245.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE	<b>Transaction ID:</b> SB23.4842 <b>Date of Disbursement</b>																				
Mailing Address 810 7TH AVENUE, 32ND FLOOR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	2		2	0	0	7
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0	2		0	2		2	0	0	7												
City NEW YORK State NY Zip Code 10019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MEDIA EXPENSES	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

590.00

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE Mailing Address 810 7TH AVENUE, 32ND FLOOR	<b>Transaction ID:</b> SB23.5212 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 0 7</div> </div>
City NEW YORK State NY Zip Code 10019 Purpose of Disbursement MEDIA EXPENSES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>240.94</div> <div>101</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE Mailing Address 810 7TH AVENUE, 32ND FLOOR	<b>Transaction ID:</b> SB23.5208 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 0 7</div> </div>
City NEW YORK State NY Zip Code 10019 Purpose of Disbursement MEDIDA EXPENSE REFUND Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>-100.00</div> <div>101</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE Mailing Address 810 7TH AVENUE, 32ND FLOOR	<b>Transaction ID:</b> SB23.5209 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 0 7</div> </div>
City NEW YORK State NY Zip Code 10019 Purpose of Disbursement MEDIDA EXPENSE REFUND Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>-490.00</div> <div>101</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

-349.06

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE	<b>Transaction ID:</b> SB23.5210 <b>Date of Disbursement</b>																				
Mailing Address 810 7TH AVENUE, 32ND FLOOR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	3		2	0	0	7												
City NEW YORK State NY Zip Code 10019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MEDIDA EXPENSE REFUND	<table border="1"> <tr> <td>-490.00</td> </tr> </table>	-490.00																			
-490.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE	<b>Transaction ID:</b> SB23.5211 <b>Date of Disbursement</b>																				
Mailing Address 810 7TH AVENUE, 32ND FLOOR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	3		2	0	0	7												
City NEW YORK State NY Zip Code 10019	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MEDIDA EXPENSE REFUND	<table border="1"> <tr> <td>-245.00</td> </tr> </table>	-245.00																			
-245.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.4903 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	7												
City Lake Havasu City State AZ Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
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84.40																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
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**SUBTOTAL** of Disbursements This Page (optional) .....

-650.60

**TOTAL** This Period (last page this line number only) .....



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

### A. SUNCOAST HOTEL AND CASION

Full Name (Last, First, Middle Initial)

Mailing Address 9090 ALTA DR

City LAS VEGAS State NV Zip Code 89145

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4866

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.97

### B. UNITED AIR

Full Name (Last, First, Middle Initial)

Mailing Address 1 United Sales Center

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4867

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

### C. UNITED AIR

Full Name (Last, First, Middle Initial)

Mailing Address 1 United Sales Center

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional) .....

152.97

TOTAL This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 2345 CRYSTAL DVE	<b>Transaction ID:</b> SB23.4890 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 7</div> </div>
City ARLINGTON State VA Zip Code 22227 Purpose of Disbursement TRAVEL EXPENSES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>394.40</div> <div>101</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) VERIZON WIRELESS Mailing Address 4238 Wilson Blvd City Arlington State VA Zip Code 22203 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.5222 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>252.75</div> <div>101</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) VERIZON WIRELESS Mailing Address 4238 Wilson Blvd City Arlington State VA Zip Code 22203 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.5223 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>356.91</div> <div>101</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

1004.06

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) VERIZON WIRELESS	<b>Transaction ID:</b> SB23.5229 <b>Date of Disbursement</b>																				
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0	3		0	8		2	0	0	7												
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178.73																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) VONAGE USA	<b>Transaction ID:</b> SB23.4834 <b>Date of Disbursement</b>																				
Mailing Address 23 Main St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	7
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0	1		1	0		2	0	0	7												
City Holmdel State NJ Zip Code 07733	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td colspan="10">54.73</td> </tr> </table>	54.73																			
54.73																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) VONAGE USA	<b>Transaction ID:</b> SB23.4836 <b>Date of Disbursement</b>																				
Mailing Address 23 Main St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	6		2	0	0	7												
City Holmdel State NJ Zip Code 07733	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td colspan="10">51.30</td> </tr> </table>	51.30																			
51.30																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

284.76

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) VONAGE USA Mailing Address 23 Main St.	<b>Transaction ID:</b> SB23.4845 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>0</td><td>9</td><td></td> <td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	9		2	0	0	7												
City Holmdel State NJ Zip Code 07733 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>58.13</td> </tr> </table>	58.13																			
58.13																					
<b>B.</b> Full Name (Last, First, Middle Initial) VONAGE USA Mailing Address 23 Main St.	<b>Transaction ID:</b> SB23.4868 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td> <td>2</td><td>7</td><td></td> <td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	7		2	0	0	7												
City Holmdel State NJ Zip Code 07733 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>51.06</td> </tr> </table>	51.06																			
51.06																					
<b>C.</b> Full Name (Last, First, Middle Initial) VONAGE USA Mailing Address 23 Main St.	<b>Transaction ID:</b> SB23.4877 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>0</td><td>9</td><td></td> <td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	0	7												
City Holmdel State NJ Zip Code 07733 Purpose of Disbursement TELEPHONE/INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>58.13</td> </tr> </table>	58.13																			
58.13																					

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

167.32

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) VONAGE USA Mailing Address 23 Main St. City Holmdel State NJ Zip Code 07733 Purpose of Disbursement TELEPHONE INTERNET Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.4904 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	7												
Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">51.06</td> </tr> </table> Category/ Type 101	51.06																				
51.06																					
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK SERVICE CHARGES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.4833 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	7												
Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">12.46</td> </tr> </table> Category/ Type 101	12.46																				
12.46																					
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK OVERDRAFT FEES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.4844 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	2		2	0	0	7												
Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">105.00</td> </tr> </table> Category/ Type 101	105.00																				
105.00																					

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

168.52

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	<b>Transaction ID:</b> SB23.4846 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 9 / 2 0 0 7</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK SERVICE CHARGES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>12.00</div> <div>101</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK SERVICE CHARGES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.4878 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>12.31</div> <div>101</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK OVERDRAFT FEES Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.4898 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>105.00</div> <div>101</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

129.31

**TOTAL** This Period (last page this line number only) ..... ►

15995.90

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4619

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
1 7Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 64 / 79

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4621

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 4Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

30000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4629

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 4Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

3000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 66 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4622

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 7Y Y Y Y  
2 0 0 6

12/31/2006

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 67 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4623

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 7Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

100.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 68 / 79

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4726

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 0D D  
2 5Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 69 / 79

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4743

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
3 0Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

6000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 70 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4744

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
1 8Y Y Y Y  
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 71 / 79

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5215

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

806.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

806.74

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 7Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

806.74

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 72 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5217

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

181.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

181.87

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 7Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

181.87

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 73 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5220

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

95.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95.70

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 3Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

95.70

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 74 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5216

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 5Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1500.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 75 / 79

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5219

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

43.59

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

43.59

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 6Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

43.59

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 76 / 79

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5221

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 8Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule C-P**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 77 / 79

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5218

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

787.83

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

787.83

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
0 8Y Y Y Y  
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

787.83

**TOTALS** This Period (last page in this line only) ▶

73515.73

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 78 / 79

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
CONSULTING FOR ACCOUNTING  
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5213

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NETWORK GUILD LLCNature of Debt (Purpose):  
WEBSITE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code  
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.5214

Amount Incurred This Period

10000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELLEN REYNOLDSNature of Debt (Purpose):  
RENTAL NEWHEMPSHIRE

Mailing Address 7 ROBINSON LANE

City State ZIP Code  
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20471

Amount Incurred This Period

1214.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

1214.40

1) **SUBTOTALS** This Period This Page (optional).....

16214.40

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 79 / 79

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELLEN REYNOLDSNature of Debt (Purpose):  
RENTAL NEWHEMPSHIRE

Mailing Address 7 ROBINSON LANE

City State ZIP Code  
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20472

Amount Incurred This Period

1200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELLEN REYNOLDSNature of Debt (Purpose):  
RENTAL NEWHEMPSHIRE

Mailing Address 7 ROBINSON LANE

City State ZIP Code  
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20473

Amount Incurred This Period

1200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

2400.00

2) **TOTALS** This Period (last page this line number only)..... ▶

18614.40

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

73515.73

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

92130.13